

Medicaid NCCI Savings Report

CMS wants to remind states that they are required to submit reports of savings resulting from application of NCCI edits on a quarterly basis. The reports must be submitted using the accompanying template which is posted on the MII website on the RISSNET portal. States should send the reports to their CMS Regional Office.

The quarter is defined by the date of claim submission. Savings should be based on what would have been paid for the claim line, not on the submitted charge for the claim line. Duplicate claim denials due to NCCI edits should not be included in the report of NCCI savings.

Application of NCCI edits to claims for beneficiaries in Primary Care Case Management (PCCM) type HMOs is required. Savings from NCCI edits applied to those claims should be included in the savings that is reported from application of NCCI edits to FFS claims.

Application of NCCI edits to claims for beneficiaries in Managed Care Organization (MCO) type HMOs is optional as is reporting of savings from those edits if they are applied. If savings from NCCI edits applied to those claims is reported, they should be on a report that is separate from the FFS/PCCM savings.

NCCI Savings Reports should not include savings from non-NCCI, state-specific edits, including Add-On Code edits.